

## STATE OF NEW HAMPSHIRE

## 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVED

JAN 29 2019

I. Name of Lobbyist(s)	Robert L. Best		NEW HAMPSHIRE DEPARTMENT OF STATE
II. Name of lobbyist's part	nership, firm or corporation, if a	ny:	
Sulloway & Ho	llis, P.L.L.C.		
	artnership, firm or corporation)		
9 Capitol Street	t, Concord, NH 03301		
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) 224-2341	(603) 226-2404	e-mail <u>rbest@sullo</u> v	way.com
(Telephone)	· (Fax	)	
	(Choose one – file separate reportions which are not attributable	rts for each client, OR you may fil to any one client).	e a separate report for
☐ All reportable transaction	ns occurring in the months prior to	the reporting date relative to the fol	lowing client:
New Hamp	shire Auctioneers Associatio	on, Inc.	
(Full	Name of Client as it appears on the Lo		
OR			12 - 11 - 12 - 12 - 1
unrelated to any particular cl		obyist's family), or the lobbying firm	n listed below which are
	il 25, 2018 🛘	July 25, 2018 🛚	
	n date of registration to 3/31/18	activity from 4/1/18 to 6/30/18	
	ober 31, 2018	January 30, 2019 🖟 activity from 10/1/18 to 12/31/18	
		e transactions made since the la he Secretary of State's Office, State	
VI. Check if additional rep	orts are attached:		
☐ If you have received fee	s or made expenditures, you must	file Addendum A- Fees and Expen	ses
☐ If you have paid an hono Expense Reimbursement	orarium or reimbursed expenses, yo	ou must file Addendum B- Report	of Honorariums or
•	r family has made political contrib	outions, you must file Addendum C	- Political Contributions
Sworn Statement/Affirmat I have read RSA 15, RSA 15 and complete to the best of n (Signature of lobbyist)	-B, RSA 14-C and RSA 664 and h	nereby swear or affirm that the foreg	going information is true
Robert L. Best (Print Name of lobbyist)			